

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Fraternity & Sorority Political Action Committee

ADDRESS (number and street) ▼

PO Box 3435

☐ Check if different than previously reported. (ACC)

Alexandria

VA

22302

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00410068

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election Year Only)
- ☐ Mar 20 (M3) ☒ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
05 01 2014

through

M M M / D D D / Y Y Y Y Y Y
05 31 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Margee Clancy

Signature of Treasurer

Margee Clancy

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
06 19 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Fraternity & Sorority Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 05 / 01 / 2014 To: M M / D D / Y Y Y Y Y Y 05 / 31 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2014		125443.02
(b) Cash on Hand at Beginning of Reporting Period.....	243604.29	
(c) Total Receipts (from Line 19)	14475.00	228002.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	258079.29	353445.02
7. Total Disbursements (from Line 31)	77787.94	173153.67
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	180291.35	180291.35
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Fraternity & Sorority Political Action Committee

Report Covering the Period:

From:

 M M / D D / Y Y Y Y
 05 / 01 / 2014

To:

 M M / D D / Y Y Y Y
 05 / 31 / 2014
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

9600.00

164710.00

(ii) Unitemized

825.00

28617.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

10425.00

193327.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

10425.00

193327.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

4050.00

34675.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

14475.00

228002.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

14475.00

228002.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	47728.28	73541.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	47728.28	73541.61
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19500.00	88500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	250.00
29. Other Disbursements	10559.66	10862.06
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	77787.94	173153.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	77787.94	173153.67

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	10425.00	193327.00
34. Total Contribution Refunds (from Line 28(d))	0.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10425.00	193077.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	47728.28	73541.61
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	47728.28	73541.61

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 18

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. Derick Close

Mailing Address 300 Chatham Avenue
Ste. 102

City State Zip Code
Rock Hill SC 39730

FEC ID number of contributing
federal political committee.

C

Name of Employer

Springs Creative

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

05 / 01 / 2014

Transaction ID : SA11AI.17282

Amount of Each Receipt this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. J. Michael Duesing

Mailing Address 69 Eastlake Road

City State Zip Code
Ithaca NY 14850

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stewart Howe Alumni Service

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 10 / 2014

Transaction ID : SA11AI.17292

Amount of Each Receipt this Period

350.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Charles Heflin

Mailing Address 440 L Street, NW
Unit 502

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lock Lord Strategies

Occupation

Senior Policy Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.17300

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. James Hickey

Mailing Address 4608 Edina Blvd.

City State Zip Code
Edina MN 55424

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Private Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 17 / 2014

Transaction ID : SA11Al.17303

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Nicole Hughes

Mailing Address 75 Pine St
Apt 208

City State Zip Code
Edmonds WA 98020

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

IBM

IT Professional

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 10 / 2014

Transaction ID : SA11Al.17298

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Charles Mancuso

Mailing Address 11350 56th Place North

City State Zip Code
Royal Palm Beach FL 33411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11Al.17281

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. Steven Priepke

Mailing Address 1280 S Alhambra Cir
Apt. 1321

City State Zip Code
Coral Gables FL 33146

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Miami

Occupation

Dean

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.17299

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Todd Reaves

Mailing Address PO Box 2207

City State Zip Code
Columbus GA 31902

FEC ID number of contributing
federal political committee.

C

Name of Employer

Omega Financial, Inc.

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2014

Transaction ID : SA11AI.17288

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5250.00

9600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. Alpha Epsilon Phi-Iota Chapter

Mailing Address 329 N Salina Street
Ste. 400

City State Zip Code
Syracuse NY 13203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 17 / 2014

Transaction ID : SA17.17314

Amount of Each Receipt this Period

500.00

Non-Contribution Account

Full Name (Last, First, Middle Initial)

B. Delta Iota House Corporation

Mailing Address 248 W Dickson Street

City State Zip Code
Fayetteville AR 72701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 17 / 2014

Transaction ID : SA17.17311

Amount of Each Receipt this Period

500.00

Non-Contribution Account

Full Name (Last, First, Middle Initial)

C. Pennington & Co.

Mailing Address 501 Gateway Drive
Suite A

City State Zip Code
Lawrence KS 66049-2342

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2014

Transaction ID : SA17.17308

Amount of Each Receipt this Period

1250.00

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 18
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. The Delta Chi Fraternity, Inc. - Int'l Headquarters

Mailing Address 314 Church Street
PO Box 1817

City State Zip Code
Iowa City IA 52244

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : SA17.17306

Amount of Each Receipt this Period

1500.00

Non-Contribution Account

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

3750.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. Elavon

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2014

Mailing Address One Concourse Parkway

City	State	Zip Code
Atlanta	GA	30328

Transaction ID : SB21B.17319Purpose of Disbursement
Credit Card Processing Fee

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

97.93

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Full Name (Last, First, Middle Initial)

B. Liaison Capitol Hill, An Affinia Hotel

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		07		2014

Mailing Address 415 New Jersey Ave, NW

City	State	Zip Code
Washington	DC	20001

Transaction ID : SB21B.17322Purpose of Disbursement
Gen. Fund. - Event Expense, Catering-Non Candidate

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

40219.08

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Full Name (Last, First, Middle Initial)

C. LightSpeed LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		07		2014

Mailing Address 1325 G Street, NW
Ste. 780

City	State	Zip Code
Washington	DC	20005

Transaction ID : SB21B.17324Purpose of Disbursement
Printing, Non-Candidate

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

686.01

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

41003.02

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. MAXimum Compliance, LLC

Mailing Address 4703 Woodway Lane, NW

City	State	Zip Code
Washington	DC	20016

Purpose of Disbursement
Compliance & Bookkeeping Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		07		2014

Transaction ID : SB21B.17323

Amount of Each Disbursement this Period

4584.24

Full Name (Last, First, Middle Initial)

B. Omega Financial Inc.

Mailing Address P. O. Box 2207

City	State	Zip Code
Columbus	GA	31902

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		31		2014

Transaction ID : SB21B.17355

Amount of Each Disbursement this Period

22.06

Full Name (Last, First, Middle Initial)

C. PattonBoggs, LLP

Mailing Address 2550 M Street, NW

City	State	Zip Code
Washington	DC	20037

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		15		2014

Transaction ID : SB21B.17336

Amount of Each Disbursement this Period

442.50

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5048.80

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Fraternity & Sorority Political Action Committee

Category/
Type

536.61

State: District:

Category/
Type

State: District:

Category/
Type

State: District:

1447.41

47499.23

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. ALISON FOR KENTUCKY

Mailing Address 340 DEMOCRAT DRIVE

City	State	Zip Code
FRANKFORT	KY	40601

Purpose of Disbursement
Contribution

Candidate Name

ALISON LUNDERGAN GRIMES

Office Sought:	House
	<input checked="" type="checkbox"/> Senate
	President
State: KY	District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SB23.17342

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. CAIN FOR CONGRESS

Mailing Address P.O. BOX 1523

City	State	Zip Code
BANGOR	ME	04402

Purpose of Disbursement
Contribution

Candidate Name

EMILY ANN CAIN

Office Sought:	<input checked="" type="checkbox"/> House
	Senate
	President
State: ME	District: 02

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		07		2014

Transaction ID : SB23.17326

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. CARR FOR CONGRESS

Mailing Address 525 E. SEASIDE WAY, #101-C

City	State	Zip Code
LONG BEACH	CA	90802

Purpose of Disbursement
Contribution

Candidate Name

ELAN S. CARR

Office Sought:	<input checked="" type="checkbox"/> House
	Senate
	President
State: CA	District: 33

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SB23.17347

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. CITIZENS FOR COCHRAN

Mailing Address PO BOX 7183

City TUPELO	State MS	Zip Code 38802
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Purpose of Disbursement
Contribution

Candidate Name

THAD COCHRAN

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MS District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SB23.17340

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JACK KINGSTON

Mailing Address PO BOX 2133

City SAVANNAH	State GA	Zip Code 31402
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Purpose of Disbursement
Contribution

Candidate Name

REP JOHN H. KINGSTON Sr.

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼

State: GA District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		26		2014

Transaction ID : SB23.17351

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. HAGAN FOR US SENATE INC

Mailing Address PO BOX 29103

City GREENSBORO	State NC	Zip Code 27429
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Purpose of Disbursement
Contribution

Candidate Name

KAY R. HAGAN

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NC District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SB23.17338

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. MCCONNELL SENATE COMMITTEE '14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Mailing Address PO BOX 1496

City	State	Zip Code
LOUISVILLE	KY	40201

Transaction ID : SB23.17341Purpose of Disbursement
Contribution

Candidate Name

MITCH MCCONNELLCategory/
Type

Amount of Each Disbursement this Period

1500.00

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2014

☐ Primary☒ General☐ Other (specify) ▼

State: KY

District: 00

Full Name (Last, First, Middle Initial)

B. PAT ROBERTS FOR US SENATE INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Mailing Address PO BOX 433

City	State	Zip Code
GREAT BEND	KS	67530

Transaction ID : SB23.17345Purpose of Disbursement
Contribution

Candidate Name

PAT ROBERTSCategory/
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2014

☒ Primary☐ General☐ Other (specify) ▼

State: KS

District: 00

Full Name (Last, First, Middle Initial)

C. STEVE DAINES for MONTANA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Mailing Address PO BOX 1598

City	State	Zip Code
HELENA	MT	59624

Transaction ID : SB23.17339Purpose of Disbursement
Contribution

Candidate Name

STEVEN DAINESCategory/
Type

Amount of Each Disbursement this Period

4000.00

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2014

☒ Primary☐ General☐ Other (specify) ▼

State: MT

District: 00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6500.00

19500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. Liaison Capitol Hill, An Affinia Hotel

Mailing Address 415 New Jersey Ave, NW

City	State	Zip Code
Washington	DC	20001

Purpose of Disbursement	<input type="text"/>
Non-Contribution Account-Gen. Fund. - Event Expense, Catering-Non Candidate	
Candidate Name	Category/Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		07		2014

Transaction ID : SB29.17330

Amount of Each Disbursement this Period

7097.49

Full Name (Last, First, Middle Initial)

B. LightSpeed LLCMailing Address 1325 G Street, NW
Ste. 780

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement	<input type="text"/>
Non-Contribution Account-Printing, Non-Candidate	
Candidate Name	Category/Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		07		2014

Transaction ID : SB29.17332

Amount of Each Disbursement this Period

121.07

Full Name (Last, First, Middle Initial)

C. MAXimum Compliance, LLC

Mailing Address 4703 Woodway Lane, NW

City	State	Zip Code
Washington	DC	20016

Purpose of Disbursement	<input type="text"/>
Non-Contribution Account - Compliance & Bookkeeping Services	
Candidate Name	Category/Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		07		2014

Transaction ID : SB29.17331

Amount of Each Disbursement this Period

180.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7398.56

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. North American Interfraternity Conference

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2014

Mailing Address 3901 W 86th Street
Suite 390

City Indianapolis State IN Zip Code 46268

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Category/
Type**Transaction ID : SB29.17333**

Amount of Each Disbursement this Period

3000.00

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Reflections Photography

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2014

Mailing Address 631 Pennsylvania Avenue, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Non-Contribution Account-Gen. Fund. Event Photography-Non Candidate

Candidate Name

Category/
Type**Transaction ID : SB29.17335**

Amount of Each Disbursement this Period

127.20

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

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Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

3127.20

TOTAL This Period (last page this line number only)..... ►

10525.76
